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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S09222

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ITZ PROPERTIES CORPO	RATION			
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AK BLVD.	4009 LIVE OAK BLVD.	46		
UTI FL 33993	US US	1 0	DO NOT WRITE IN	THIS SPACE
			3. Date Incorporated or Qualifed	
			08/31/1990	
Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	26		65-0226216	Not Applicable
t. #, etc.	⊢ '''		5. Certificate of Status Desired	\$8.75 Additional Fee Required
ate			6 Flortion Campaign Financing	\$5.00 May Be
	 		` * 11	Added to Fees
Country	Zip	Country	8. This corporation owes the current year	
25	29	30	Personal Property Tax.	☐ Yes → O
			10. Name and Address of New Register	red Agent
		81 Name	•	
	MATRI	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
, a		82	্রের প্রতিষ্ঠান করিছে হার্মিক কর্মান করিছে জানুষ্ঠান করিছে	(4)2 246 (2)2 6 4 (4)2 (4) (4)2 (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)
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	•	84 City	hyre; ,	85 Zip Code
t to the provisions of Sections 607.	0502 and 607 1508. Florida Sta	tutes, the above-named corr	poration submits this statement for the ourses	se of changing its registered
registered agent, or both, in the St	tate of Florida. Such change was	authorized by the corporati	on's board of directors. I hereby accept the a	ppointment as registered
		Inrida Statutos	* '	
	oligations of, Section 607.0505, I	Florida Statutes.		
am familiar with, and accept the ob-		Florida Statutes. OTE: Registered Agent signature require		
Signature, typed or printed name of registered OFFICERS	I agent and title if applicable. (NC AND DIRECTORS	OTE: Registered Agent signature require	ed when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECTORS IN 12
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90019 018 ***150.00